

Job Aid

Cultural Competency Framework

<p>Intercultural Concepts</p> <ul style="list-style-type: none"> ❖ Culture is important in every patient's identity ❖ Communication of cultural understanding and respect is essential for establishing rapport and confidence ❖ Culture-related stresses and tensions can induce illness ❖ Culture-related behaviors (e.g., religion, diet) affect a patient's acceptance of and adherence to prescribed therapy ❖ Nonverbal and verbal communication may differ from culture to culture 	<p>Knowledge</p> <p>(Should be specific for each culture represented and include the following)</p> <ul style="list-style-type: none"> ❖ Common dietary habits, foods, and their nutritional components ❖ Predominant cultural values, health practices, traditional health beliefs ❖ Family structure—patriarchal vs. matriarchal; nuclear vs. extended; role of individual members ❖ Effect of religion on health beliefs and practices ❖ Customs and attitudes surrounding death ❖ Significance of common verbal and nonverbal communication ❖ Awareness of the culture shock experienced by the very poor and immigrants on entering modern health centers ❖ Awareness of prevailing cross-cultural tensions and psychosocial issues 	
<p>Intercultural Skills</p> <p>(Should be specific for each culture represented and include the following)</p> <ul style="list-style-type: none"> ❖ Communicate an understanding of patient's culture ❖ Elicit patient's understanding of patient's culture ❖ Recognize culture-related health problems ❖ Negotiate a culturally relevant care plan with patient as partner ❖ Interpret verbal and nonverbal behaviors in a culturally relevant manner ❖ Have basic or essential language proficiency ❖ Apply principles of clinical epidemiology to common illnesses 		
<p>Intercultural Attitudes</p> <ul style="list-style-type: none"> ❖ Recognize the importance of the patient's cultural background and environment when constructing an approach to an illness ❖ Acknowledge the patient's role as an active participant in his or her care ❖ Accept responsibility for the patient who has few support systems; avoid the "what can I do?" attitude when facing a patient in abject poverty or with language barriers 		

The content for this material was excerpted from the U.S. Department of Health and Human Services, Office of Minority Health. *A Physician's Practical Guide to Culturally Competent Care*. Available at: <https://cccm.thinkculturalhealth.org/default.asp>